

Massachusetts Department of Environmental Protection  
Environmental Results Program  
**Installation Compliance Certification**  
**For New Engines and Turbines (Non-Emergency)**

Facility Name \_\_\_\_\_

MassDEP Facility ID# (if known) \_\_\_\_\_

## A. Facility Information

**Important:** When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Facility Location:

Facility Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Federal Employer ID # (FEIN) \_\_\_\_\_

2. Mailing Address and Contact Information:

Street/PO Box: \_\_\_\_\_

Email Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Contact Person Name \_\_\_\_\_

Contact Person Title \_\_\_\_\_

## B. Compliance Information

Complete and submit an Initial Compliance Certification form for *each* new engine and turbine that is subject to the Environmental Results Program (ERP) for Engines and Turbines. Answer all questions. **IMPORTANT NOTE:** Answering "No" to certain questions requires completion of the Return to Compliance form. In these cases, the notation "RTC" appears next to "No."

Manufacturer of Unit \_\_\_\_\_

Model \_\_\_\_\_

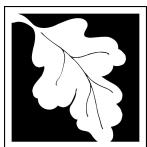
Serial # \_\_\_\_\_

EOT ID # \_\_\_\_\_

Rated Power Output  
(Kilowatts) \_\_\_\_\_

Date Installed \_\_\_\_\_

- |   |   |                             |
|---|---|-----------------------------|
| 1. Is the new unit an engine?   | <input type="checkbox"/> Yes – Go to Question 3 | <input type="checkbox"/> No |
| 2. Is the new unit a turbine?   | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No |
| 3. Is the primary fuel to be burned natural gas?  | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No |
| 4a. Is the primary fuel to be burned fuel oil?  | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No |
| 4b. Are you only accepting delivery of fuel that meets the sulfur content requirements pursuant to 310 CMR 7.05 (i.e. less than 15 ppm sulfur)?<br><i>Workbook Section 2.2.</i> | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No |



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**B. Compliance Information** (continued)

6. For the engine or turbine, have you attached a ☐ Yes ☐ No – RTC  
*Supplier Certification of Emission Performance Form* from your supplier that the engine or turbine meets the applicable emission limitations at the time of installation and is capable of compliance with the emission limitations for the lesser of 15,000 hours of operation or the first three years of operation?

*Workbook Section 2.1.*

- 8a. Is the exhaust stack configured to discharge the combustion gases vertically and is not equipped with any part or device that impedes the vertical exhaust flow of the emitted combustion gases? ☐ Yes ☐ No – RTC

*Workbook Section 2.4.*

- 8b. Have you located the unit to minimize emission impacts upon sensitive receptors including, but not limited to, people, windows and doors that open, and building fresh air intakes by employing good air pollution control engineering practices? Such practices include avoiding locations that may be subject to down wash of the exhaust and providing sufficient stack height to minimize flue gas impacts upon sensitive receptors. ☐ Yes ☐ No – RTC

*Workbook Section 2.4*

**For questions 8c, 8d and 8e, answer only the question(s) that applies to your unit's power output rating.**

- 8c. If the unit has a power output rating of less than 300 kilowatts and burns liquid fuel, is the stack height a minimum of five feet above the facility rooftop or unit enclosure, whichever is higher? ☐ Yes – Go to Question 11 ☐ No – RTC

*Workbook Section 2.4*

- 8d. If the unit has a power output rating of 300 kilowatts or greater, is the stack height a minimum of ten feet above the facility rooftop or unit enclosure, whichever is higher? ☐ Yes – Go to Question 11 ☐ No – Go to Question 9

*Workbook Section 2.4.*



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**B. Compliance Information** (continued)

- 8e. If the unit has a rated power output of one megawatt or greater, is the height of the stack at least ten feet above and greater than 1.5 times above the height of the building, and higher than the height of any structure that is within 5L of the stack (5L being five times the lesser of the height or maximum projected width of the structure)?  
*Workbook Section 2.4.*
- ☐ Yes – Go to Question 11      ☐ No – Go to Question 9
9. If you answered No to Question 8e, have you performed an analysis using an EPA dispersion model to determine that emissions will not cause a violation of the National Ambient Air Quality Standards?  
*Workbook Section 2.4.  
See Appendix 1 for data needs.*
- ☐ Yes      ☐ No – RTC
10. Did the analysis demonstrate that the stack emissions will not cause a violation of the National Ambient Air Quality Standards?
- ☐ Yes      ☐ No – RTC
11. Is the unit designed and have you located the unit so that when operated, sound impacts upon sensitive receptors will be minimized and be in compliance with 310 CMR 7.10 Noise?  
*Workbook Section 2.5.*
- ☐ Yes      ☐ No – RTC
12. Have you put in place procedures to maintain records as listed in Section 2.6 of the workbook?
- ☐ Yes      ☐ No – RTC



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## C. Certification Statement

Note: Complete all required forms before signing this statement

I attest under the pains and penalties of perjury:

- I. That I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement;
- II. That, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is, to the best of my knowledge, true, accurate, and complete;
- III. That systems to maintain compliance are in place at the facility and will be maintained even if processes or operating procedures are changed; and
- IV. That I am fully authorized to make this attestation on behalf of this facility.

I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

Signature \_\_\_\_\_

Print First Name \_\_\_\_\_

Print Last Name \_\_\_\_\_

Title \_\_\_\_\_

Date of Certification (MM/DD/YYYY) \_\_\_\_\_

### Source of Signatory Authority:

If a Corporation:

☐ President

☐ Secretary

☐ Treasurer

☐ Vice President (if authorized by corporate vote)

☐ Representative of the above (if authorized by corporate vote and if responsible for overall operation of the facility)

If a Partnership:

☐ General Partner

If a Sole Proprietorship:

☐ Proprietor

If a Municipality or Public Agency:

☐ Principal Executive Officer

☐ Ranking Elected Official (empowered to enter into contracts on behalf of the municipality or public agency)